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|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER 10/613,117 | FILING DATE 07/03/2003 RULE | CLASS 356 | GROUP ART UNIT 2877 | ATTORNEY DOCKET NO. LIFE-090CON4 |
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** CONTINUING DATA *****

MS This application is a CON of 10/233,046 08/30/2002 PAT 6,624,882
which is a CON of 09/723,339 11/27/2000 PAT 6,614,522
which is a CON of 09/264,461 03/08/1999 PAT 6,152,889
which is a DIV of 08/706,663 09/06/1996 PAT 5,879,310
which is a CIP of 08/525,390 09/08/1995 ABN
and is a CIP of 08/525,942 09/08/1995 PAT 5,879,367

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/01/2003

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|---|----------|---------|--------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: _____ | MN | 28 | 19 | 2 |

ADDRESS

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TITLE

Body fluid sampler

FILING FEE

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1040

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time)☐ 1.18 Fees (Issue)